

Indiana Department of Homeland Security Training Application PLEASE PRINT ALL INFORMATION



□тм	FOR DEPT. OF HOM Date Entered: Date Rec	MELAND SECURITY USE ONLY eived: Prerequisite(s) met? Yes \(\text{No} \) \(\text{No} \)
Student Name: Canine Name(s) (2 max SAR courses only)		Organization Represented: Position in Organization:
Driver's License # (Student ID): (Mandatory for registration)		Discipline (check all that apply): EMA LAW ENFORCEMENT EMS OTHER
Mailing Addı	ress: Home Business	Work Phone:
		Number for Messages:
Course Name and Date:		Email Address:
Course # (if a	applicable):	Fax Number:
 I will need a hotel room*: Yes No *Applicable ONLY to Emergency Management, Search and Rescue, and C.E.R.T. courses taught at Grissom and Camp Atterbury. For questions concerning lodging eligibility, please contact course manager. More information on lodging will arrive with your registration confirmation letter. If you live 75+ miles from the training site, you will receive lodging the night before class and, if it's a multi-day class, lodging during the class. If you live 50-74 miles from the training site, you will receive lodging during (not the night before the first day) the class IF it is a multi-day class. If you live less than 50 miles from the training site you will not receive lodging. Courses taken to meet prerequisite, including dates and location: If you have any special needs, please let us know how we can help: 		
Briefly describe your activities or responsibilities as they relate to this course:		
Signature of	Immediate Supervisor:	Date:
For course registration contact Denise Clarke (317) 234-4286 or declarke@dhs.in.gov . Applications may be faxed to 317-234-0736. For additional course information, visit the IDHS website at www.in.gov/dhs/training .		
Mail applications to Attn: IDHS Training Indiana Department of Homeland Security 302 W. Washington Street E-208 Indianapolis, IN 46204.		
For applications to FEMA's Emergency Management Institute, complete FEMA Form 75-5 online at		